

# Work Order ID 60661

July 16, 2010 8:21:47 AM



Page 1

Item ID: D3110-3

Accept



Setup Start



Revision ID:

Item Name: Handle

Stop



Start Date: 7/16/10

Start Qty: 2.00



Cust Item ID:

Required Date: 7/20/10

Req'd Qty: 2.00



Customer:

Reference:

Approvals:

Process Plan: CY

Date: 10/7/16 Tooling:

Date:

Run Start



QC:

Date: SPC (Y/N):

Date:

Stop



Sequence ID/  
Work Center ID

Operation  
Description

Set Up/  
Run Hours

Tool ID

Tool #

Plan  
Code

Accept  
Qty

Reject  
Qty

Reject  
Number

Insp.  
Stamp

Draw Nbr

Revision Nbr

D3110

Rev C

100

0.00



PURCHASING

Purchasing

Memo

0.00

Purchasing

Issue P/O: 12272 Description: Handle Possible suppliers: Adams ritè p/n  
AR34 Bell p/n 70-027-1 Premier p/n 034-23002-01

CY 10/7/16 (2)

110

QC6- Inspect dimensions to drawing

0.00



QC

Memo

0.00

Quality Control

Ensure Material certification comply to Dwg D3110 Check handle to dwg.

CY 10/7/19 (2)

120

Identify as per dwg & Stock Location: 34

0.00



Packaging

Memo

0.00

Packaging

10-7-20 sf (20)

| W/O: |      |  | WORK ORDER CHANGES |    |      |     |                                     |                          |
|------|------|--|--------------------|----|------|-----|-------------------------------------|--------------------------|
| DATE | STEP |  | PROCEDURE CHANGE   | By | Date | Qty | Approval<br>Chief Eng /<br>Prod Mgr | Approval<br>QC Inspector |
|      |      |  |                    |    |      |     |                                     |                          |
|      |      |  |                    |    |      |     |                                     |                          |

Part No: \_\_\_\_\_ PAR #: \_\_\_\_\_ Fault Category: \_\_\_\_\_ NCR: Yes No DQA: \_\_\_\_\_ Date: \_\_\_\_\_

Resolution: \_\_\_\_\_ Disposition: \_\_\_\_\_ QA: N/C Closed: \_\_\_\_\_ Date: \_\_\_\_\_

| NCR: |      |  | WORK ORDER NON-CONFORMANCE (NCR) |                             |                                 |                |                           |                       |                          |
|------|------|--|----------------------------------|-----------------------------|---------------------------------|----------------|---------------------------|-----------------------|--------------------------|
| DATE | STEP |  | Description of NC<br>Section A   | Corrective Action Section B |                                 |                | Verification<br>Section C | Approval<br>Chief Eng | Approval<br>QC Inspector |
|      |      |  |                                  | Initial<br>Chief Eng        | Action Description<br>Chief Eng | Sign &<br>Date |                           |                       |                          |
|      |      |  |                                  |                             |                                 |                |                           |                       |                          |
|      |      |  |                                  |                             |                                 |                |                           |                       |                          |
|      |      |  |                                  |                             |                                 |                |                           |                       |                          |

**NOTE:** Date & initial all entries

# Work Order ID 60661

July 16, 2010 8:21:48 AM



Page 2

Item ID: D3110-3

Accept



Setup Start



Revision ID:

Stop



Item Name: Handle

Start Date: 7/16/10

Start Qty: 2.00



Cust Item ID:

Required Date: 7/20/10

Req'd Qty: 2.00



Customer:

Reference:

Run Start



Approvals:

Process Plan:

Date:

Tooling:

Date:

Stop



QC:

Date:

SPC (Y/N):

Date:

Sequence ID/  
Work Center ID

Operation  
Description

Set Up/  
Run Hours

Tool ID

Tool #

Plan  
Code

Accept  
Qty

Reject  
Qty

Reject  
Number

Insp.  
Stamp

130

QC21- Final Inspection - Work Order Release

0.00



QC

Memo

0.00

Quality Control

10/07/21

MF  
10-7-21

| W/O: |      |  | WORK ORDER CHANGES |    |      |     |                                     |                          |
|------|------|--|--------------------|----|------|-----|-------------------------------------|--------------------------|
| DATE | STEP |  | PROCEDURE CHANGE   | By | Date | Qty | Approval<br>Chief Eng /<br>Prod Mgr | Approval<br>QC Inspector |
|      |      |  |                    |    |      |     |                                     |                          |
|      |      |  |                    |    |      |     |                                     |                          |

Part No: \_\_\_\_\_ PAR #: \_\_\_\_\_ Fault Category: \_\_\_\_\_ NCR: Yes No DQA: \_\_\_\_\_ Date: \_\_\_\_\_

Resolution: \_\_\_\_\_ Disposition: \_\_\_\_\_ QA: N/C Closed: \_\_\_\_\_ Date: \_\_\_\_\_

| NCR: |      |  | WORK ORDER NON-CONFORMANCE (NCR) |                             |                                 |                |                           |                       |                          |
|------|------|--|----------------------------------|-----------------------------|---------------------------------|----------------|---------------------------|-----------------------|--------------------------|
| DATE | STEP |  | Description of NC<br>Section A   | Corrective Action Section B |                                 |                | Verification<br>Section C | Approval<br>Chief Eng | Approval<br>QC Inspector |
|      |      |  |                                  | Initial<br>Chief Eng        | Action Description<br>Chief Eng | Sign &<br>Date |                           |                       |                          |
|      |      |  |                                  |                             |                                 |                |                           |                       |                          |
|      |      |  |                                  |                             |                                 |                |                           |                       |                          |
|      |      |  |                                  |                             |                                 |                |                           |                       |                          |

**NOTE:** Date & initial all entries

# Picklist Print

July 16, 2010 8:21:47 AM

Page 1

Work Order ID: 60661



Parent Item: D3110-3



Parent Item Name: Handle


Start Date: 7/16/10

Required Date: 7/20/10

Start Qty: 2.00

Required Qty: 2.00

Comments: IPP A: 02.04.04 New Issue NG

| Component Item ID/<br>Item Name  | Replacement<br>Item ID | Mfg/<br>Purch | Bin<br>Item | Primary<br>Location | Last<br>Location | Route<br>Seq ID | Unit of<br>Measure | Qty on<br>Hand | Qty per Kit | Total<br>Qty | Qty<br>Issued | Date<br>Issued | Status |
|--|------------------------|---------------|-------------|---------------------|------------------|-----------------|--------------------|----------------|-------------|--------------|---------------|----------------|--------|
| AR34<br><br>Handle |                        | Purchased     | No          |                     |                  | 110             | Each               | 0.0000         | 1           | 2            |               | 7/16/10        | (2)    |

| W/O: |      |  | WORK ORDER CHANGES |    |      |     |                                     |                          |
|------|------|--|--------------------|----|------|-----|-------------------------------------|--------------------------|
| DATE | STEP |  | PROCEDURE CHANGE   | By | Date | Qty | Approval<br>Chief Eng /<br>Prod Mgr | Approval<br>QC Inspector |
|      |      |  |                    |    |      |     |                                     |                          |
|      |      |  |                    |    |      |     |                                     |                          |

Part No: \_\_\_\_\_ PAR #: \_\_\_\_\_ Fault Category: \_\_\_\_\_ NCR: Yes No DQA: \_\_\_\_\_ Date: \_\_\_\_\_

Resolution: \_\_\_\_\_ Disposition: \_\_\_\_\_ QA: N/C Closed: \_\_\_\_\_ Date: \_\_\_\_\_

| NCR: |      |  | WORK ORDER NON-CONFORMANCE (NCR) |                             |                                 |                |                           |                       |                          |
|------|------|--|----------------------------------|-----------------------------|---------------------------------|----------------|---------------------------|-----------------------|--------------------------|
| DATE | STEP |  | Description of NC<br>Section A   | Corrective Action Section B |                                 |                | Verification<br>Section C | Approval<br>Chief Eng | Approval<br>QC Inspector |
|      |      |  |                                  | Initial<br>Chief Eng        | Action Description<br>Chief Eng | Sign &<br>Date |                           |                       |                          |
|      |      |  |                                  |                             |                                 |                |                           |                       |                          |
|      |      |  |                                  |                             |                                 |                |                           |                       |                          |
|      |      |  |                                  |                             |                                 |                |                           |                       |                          |

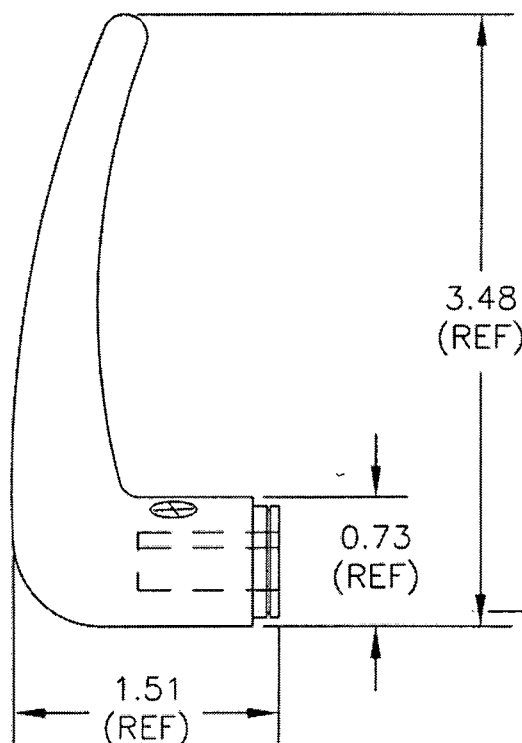
**NOTE:** Date & initial all entries



|                  |                |   |                        |
|------------------|----------------|---|------------------------|
| DESIGN<br>RF     | DRAWN BY<br>RF | DART AEROSPACE LTD<br>HAWKESBURY, ONTARIO, CANADA |                        |
| CHECKED<br>H     | APPROVED<br>H  | DRAWING NO.<br>D3110                              | REV. C<br>SHEET 2 OF 3 |
| DATE<br>05.12.14 |                | TITLE<br>HANDLE                                   | SCALE<br>1:1           |

RELEASED

05.12.15 H



D3110-3 HANDLE

C21017116  
WID: 60661

NOTES:

- 1) POSSIBLE SUPPLIERS: ADAMS RITE P/N AR34  
BELL P/N 70-027-1  
PREMIER P/N 034-23002-01
- 2) IDENTIFY WITH DART P/N USING FINE POINT PERMANENT INK MARKER

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Dart Aerospace Ltd.  
1270 Aberdeen Street  
Hawkesbury, ON K6A 1K7  
Tel: 613 632 9577  
Fax: 613 632 1053

## PURCHASE ORDER

Purchase Order ID PO12272

Purchase Order Date 7/16/10

PO Print Date 7/16/10

Page Number 1 of 1

Order From :

VC-EAG002

EAGLE COPTERS MAINTENANCE LTD.  
823 MCTAVISH ROAD  
CALGARY, AB T2E 7G9  
CA

Contact Name

Vendor Phone 403 250 7370

Vendor Fax 403 250 7110

Vendor Account Nbr

Buyer

Chantal Lavoie

Requisition Nbr

Tax Resale Nbr 10127-2607

Terms

Net 15

Currency

CAD

FOB

Ship To :

DART AEROSPACE LTD

1270 ABERDEEN  
HAWKESBURY, ON K6A 1K7  
CANADA

**FAXED**  
C 7/16/10

| Line Nbr | Reference<br>Revision ID<br>Vendor Part Number | Description/<br>Mfg ID | Req Date/<br>Taxable | Req Qty/<br>Unit of Measure | Ship Method  | Unit Price | Extended<br>Price |
|----------|--|------------------------|----------------------|-----------------------------|--------------|------------|-------------------|
| 1        | AR34 ✓   | Handle                 | 7/21/10<br>Yes       | 2.00<br>Each                | FedEx Pl ppd | \$216.5800 | \$433.16          |

C21017119

Special Inst: AS PER DWG D3110 REV.C  
B60661  
ADAMS RITE P\*/N: AR34 OR BELL P/N:  
70-027-1

PO Total: \$433.16

**CERTIFICATE OF CONFORMITY  
REQ'D UPON DELIVERY**

Change Nbr: 1

Change Date: 7/16/10

No substitution or deviation without  
consent.  
Certificate of Conformity or Material  
Certification required when applicable



# Packing Slip

## Eagle Copters Maintenance Ltd

Shipped Date: 07/16/2010

823 McTavish Rd, NE  
Calgary, Alberta T2E 7G9  
Canada

Telephone: (403) 250-7370

Fax: (403) 250-7110

Shipment number: SH#10-002378

Ship To: Dart Aerospace Ltd.

1270 Aberdeen Street  
Hawkesbury, Ontario K6A 1K7  
Canada

Phone: 613-632-5200

Ship Via: FED EX  
Carrier Terms:  
Waybill: 7937 3576 5599  
Customer PO number: PO12272

810 10/1/19

| Item          | Part Number     | Part Description | Current Location | Qty | UOM  | Serial Number | Lot Number   |
|---------------|-----------------|------------------|------------------|-----|------|---------------|--------------|
| 1             | <u>70-027-1</u> | HANDLE           | Shipping Area    | 2   | Each |               | LT-10-008337 |
| Type of sale: |                 | Outright ✓       |                  |     |      |               |              |

Sales Order Number: SO10-00979.001

Eagle P.O. Number: PO-10-002180.1

CD 10/7/19

Attn: Chantal  
Ship Fedex P1

All Parts being sent on this packing slip have copies of the original certification on file at Eagle Copters Ltd.

\* End of Report \*

>> denotes that the Packing Slip line item has already been printed.

Eagle\_PackingSlipV1.rptl

Printed: 7/16/2010 2:49:

LOT #: LT-10-008337



Sold To: SO10-00979.00.1

Sold Date: 7/16/2010 8:03:30 PM

PART #: 70-027-1

Description: HANDLE

Serial No:

Condition: New

Qty Sold: 2.00

Cure Date:

Manufacturer: Bell Helicopter (Manufacturer)

Cycles

Hours

Total Time:

0.00

TSO:

Time Remaining:

Details of work performed/reason for removal

Receiving Inspection

Additional work to be performed upon installation

July 16, 2010

Inspector

Lic. No./Stamp

